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SEP 8 1924

# The Public Health Journal

OFFICIAL ORGAN

Canadian Public Health Association

Vol. XV

TORONTO, AUGUST, 1924

No. 8

## SPECIAL ARTICLES

### THE RELATION OF PLAY TO THE EDUCATION OF THE CHILD

DR. BRUCE MACDONALD

### THE CHURCH AND SOCIAL HYGIENE

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# The Public Health Journal

VOL. XV.

TORONTO, AUGUST, 1924

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## The Relation of Play to the Education of the Child

By DR. BRUCE MACDONALD

*Headmaster, St. Andrew's College, Toronto*

THE subject upon which I am to address you this morning is "Play in the Life of the Child". It might, perhaps, better be entitled "The Relation of Play to the Education of the Child". I have no doubt that I am addressing many who have long since realized that to educate is to do much more than merely impart to the pupil a knowledge of facts and of methods of acquiring knowledge. Important as this duty may be it is after all but a part of the teacher's obligation. We do well to remind ourselves frequently that to educate is to lead out. It is the responsibility of those entrusted with the instruction of the young to lead them out from the ignorance of inexperience to the knowledge which comes from a physical, moral and mental development, accompanied by quickened powers of observation and thought. Boys and girls at school are undoubtedly engaged in the business of living, but they are living the life of the child, not of the adult. The wise teacher realizes that soon school days—the period of Primary and Secondary preparation—will be over, and the time arrive when the individual will be placed under the necessity of living seriously, of facing problems not always easy of solution. The guiding principle is to be found in recognition of the truth that the child must be taught something of the Art of Living. Character development, as the pupil proceeds from grade to grade, thus becomes a most important object of accomplishment in the teacher's work. With this goal continually in view class work does not suffer, for, as character is strengthened, quality of work on the part of the pupil improves. After all it is the personal equation which tells in our complex modern life, and the object of education should be to assist the individual to become his developed self, to enable him to add to his personal equation those factors which will increase the force and value of his personality,—his character. To educate is to direct the development of the latent qualities and possibilities of the individual pupil that

Read at the Annual Meeting of the Canadian Social Hygiene Council, December, 1923.

they may become actualities, and by their use take on the strength which is evidenced in power of performance and of self-control. We, then, who have to do with children cannot remind ourselves too frequently that it is our privilege to lead our pupils on the road of self-development, and to so lead them that they may learn to walk alone with unfaltering step long after the instructor may have gone the way of all flesh.

The play, or recreational instinct is present in the human race, and, while in many individual cases the treadmill of life has dulled this instinct, until men and women are produced who have ceased to be conscious of its presence and who have forgotten how to set about the recreation of the power of performance and of the capacity for enjoyment, yet the fact remains that such a condition is not normal. Its perpetuation in individual cases means limitation in the performance of Life's duties and in the enjoyment of life's legitimate pleasures. This is to be regretted and is not as it should be. But when the individuals become so many that whole classes in the professional, in the business or in the labour world become affected, a situation is set up which militates against the well-being of the state. A growing consciousness of this truth on the part of the world's toilers is responsible for some of the prevailing unrest in the social fabric of our times.

Inasmuch as he belongs to the young of the human race the play instinct is the possession of every normal child. Consequently its presence must be recognized if we are to have regard to a sane development of the child's possibilities. It must be so regarded that it is given scope not merely for its own sake as affording temporary pleasure, but in relation to the important contributions which its right use can make to the general development of the individual,—that development which is the ultimate aim of the wise educator.

In considering the effect of play on the well-being of the child the thoughts of the average man turn at once to the benefits resulting in physical development as a consequence of well directed athletic activity. This is natural, for there is such a direct benefit, though we must not forget that physical development cannot be considered as existing by itself. It is essentially related to mind and spirit, and is to be regarded as but a part of the completely developed individual. However, the body is a most important part of the human equipment, for after all it is the only machine through which intellectual development may become effective, or soul culture prove of value. A healthy body means so much to the human being in relation both to his own enjoyment of life and to his ability to perform acceptably his work in the world, that the care and development of this working machine is a matter to be approached in all



seriousness. Just as the most expensive of automobiles becomes of little practical value for the purpose of locomotion, which was its chief object of construction, if the engine under the hood refuses to do its work, or the luxurious continental train fails to carry its passengers to their destination, if the huge locomotive be disabled, so the individual with weakened body finds himself seriously handicapped in all the processes of human achievement, no matter what his equipment otherwise. The disabled engine of man's invention may be replaced, but the human machine must be accepted for weal or woe during a whole lifetime.

There is much truth in the statement that it is easier to be a good Christian when possessed of a good liver. Intellectual processes are keener and more effective when the waste products of the body are being properly eliminated. This acceptable condition of well-being is largely obtained through proper exercise, play, athletic activity, not only in adult life, but also in childhood. It becomes essential then in preparing the child for life, that the care of his machine be considered of first importance. The reaction is seen in a happier outlook on life and in improved school-work. As a child he is better physically for regulated play. Muscles are developed. Physical power, ability to withstand strain, correct posture, providing possibility for the normal development of internal organs, become his possessions. Habits of exercise are inculcated which continue to furnish results long after school days are over.

Man is created in the image of God. The body is the temple of the soul, and is consequently worthy of all reverence. That there is pressing need for a recognition of the truth that the body demands care and development for its own sake, even in our own land, was amply proved by the conditions disclosed through the operation of the physical examination necessary on entering the Army. Not only were many rejected, but much time was consumed in making those accepted physically fit. The basis of preparedness in life is physical preparedness.

From the possession of a healthy and exercised body the child reaps a direct benefit in improved class work, for a properly conducted play hour re-acts on the quality of intellectual work. It provides a spiritual and mental tonic. Entertainment is supplied, and an opportunity provided by change of occupation for recovery from mental fatigue. This benefit is shared by the school. Work ceases to drag, because new life has been introduced. The evil effects of class-room life have been counteracted. Nature has been given a chance to re-adjust her balance. That the opportunity should be given hardly requires argument. Is there a teacher, for example, who has not experienced the necessity of excusing from the class-room a pupil suffering from nose bleed? Now, "nasal

hemorrhage is caused by congestion of the blood about the head resulting from forward inclination of the body in reading, and from the intellectual and emotional tension of school life". Both the child and the school profit by the introduction of reasonable periods of relief from this tension.

Graziani has fairly well established the truth of his statement that "intellectual work probably produces a toxin which brings about an immediate change in the chemical and functional qualities of the blood". He states that "the underlying cause of school anaemia, with its alterations of metabolism and its imperfect oxygenation of the blood is to be sought in the excessive accumulation of toxic products of fatigue". Inattention is frequently the result of the presence of this toxin, and fortunately for the child is often nature's defence of his well being. A well spent summer vacation improves the condition of the blood of many of our boys and girls. My own experience is that directed athletic activities go very far to make it unnecessary to burden the summer vacation with the duty of making up so much lee-way in this particular.

Again, the playing of games quickens the sense of perception. The approach of the ball, the touch of his opponent, the call of his name arouse the player to quick and direct recognition of things about him. Group games stimulate and develop facility to co-operate. The timid child learns to take his turn. The overbold is induced to wait for his. Players learn to accept defeat without discouragement, to win without undue elation. Self is subordinated to the interests of the team, for co-operation is the very life of team games. One must learn to give and take. The rights of others must be recognized. While the game is to be played for its own sake, not merely to win.

Then, too, the play hour properly directed provides an outlet for the child's surplus energies and thereby makes a welcome contribution to the problem of discipline.

It is much to be regretted that our schools are not provided with more ample playground facilities contiguous to the school itself. I am a strong believer in associating the play hour with the school rather than leaving it to playgrounds and recreation centres. Where the playfield is the school's there is greater opportunity for supervised activities and for the teacher to share in, or at least display a real interest in, the play side of school life. The result of such interest is a more effective influence in the class-room and less friction in discipline. The child discovers that his teacher's interest in him embraces his play as well as his work. The result is that a stronger bond of sympathy is set up, since the teacher is found after all to be human. With such interest and oversight there is

some hope of the child learning that work and play are not after all two opposing interests in his life, but are to be regarded rather as offering a partnership of opportunity for the benefit of his own development.

Also, when the play activities of the child are connected with his school life a great impetus is given to the production and maintenance of a desirable school patriotism, which in itself is a necessary contribution to the school atmosphere—that subtle something which is so intangible yet real, and which plays so important a part in the development of the children in any school.

If the school controls its playfield and it is situated not too far from the school building, greater latitude is afforded in selection of the hours for play. In our own country it is the custom to release the pupils in Primary and Secondary institutions for the major play period at 3.00, 3.30 or 4.00 in the afternoon. There is the time remaining until 6.00 for play. Two hours and a half is none too long for this period, when from it must be deducted the time necessary to prepare for the game and for the evening meal which follows. For many years it had not occurred to the speaker to question the reasonableness of having the main play period in the later hours of the afternoon. However, at one time in order to obtain playground facilities for the school it became necessary to divide the class-room schedule into two sessions. The morning session opened at 9.00 and closed at 11.00. All boys were then turned out to football or to other directed exercises, and the afternoon session was conducted from two to four. After four there was Cadet Corps, and such exercise as Boxing, Fencing and Wrestling. The result of this enforced change in the time-table was a marked improvement in the general buoyancy of the school and in the quality of the work done in class. Boys and Masters equally profited and asked for a similar time-table whenever possible. There is no doubt that our Canadian autumn lends itself well to a major play hour at 11.00 o'clock in the morning.

The necessity for short recess periods, which provide minor opportunities for relaxation has been so frequently discussed and appreciated by teachers that it is not necessary to dwell here upon that side of the child's play.

Games are, generally speaking, of two kinds—the group or team games and individual contests. Each has its place. There is no doubt in my mind that in Primary Schools the right of way must be given to group games in the gymnasium and team games on the field. When we remember that at this stage we are dealing with undeveloped possibilities and that the object of our games is three-fold:—i.e., to afford entertainment, to make provision for bodily development and to assist in char-

acter development, we can understand the reasonableness of the view that group games are of chief importance. In group games the entertainment is provided for the many, not the few, and for the child it is entertainment in a more attractive form. The time of the instructor is available for a larger number of participants rather than for the few while the many look on. Games in the gymnasium and on the field can be so regulated that all muscles are brought into play and internal organs strengthened, while at the same time the mind of the child is interested and he is forced to be observant if he is to satisfy the three parties concerned, his instructor, his fellows and himself.

*Working,* I use the term advisedly, alone at the bar or at other individual exercise the individual may strengthen in his character the quality of doggedness or perseverance, but there is no call in isolated exercise for the development of the social qualities of character—such as give and take, playing for the good of the whole rather than self—which an all round development demands.

When the Secondary stage is reached more time can be given to individual work, but even here great care must be exercised. No boy physically fit should be allowed to leave school without having learned to contend with others. Life is a fight and the fighting spirit should be developed on sane lines of self-control, where there is contention, but no quarrelsome spirit. Sufficient reference has already been made to the benefits of team play to justify this statement, and it is not necessary to enlarge here. A recognition of this truth on the part of physical directors has led to a falling off in the number of gymnasts developed at the present time in our gymnasiums. The influence of group games on character development has been recognized and such games have demanded a major portion of time and attention.

The need of individual contest is well met in school life, where attention is paid to Boxing, Fencing and Wrestling. It is to be regretted that Boxing cannot be taught in every school in the land. It develops pluck, endurance, ability to take and give hard blows and smile at the same time, and withal there follows with it a knowledge of self-preservation. Experience shows that the best boxers are usually the least quarrelsome.

The child should enter into the major plays, or athletic activities, only after a physical examination, and exercise should be directed for the individual with the object of meeting his peculiar needs in physical development and correction, after those needs have been detected. Weak hearts can be strengthened, narrow chests developed, spinal curvatures remedied if caught soon enough and proper exercise is

taken under direction. It is through ignorance that most of such conditions become chronic, and because of entering into the wrong branch of sport that they become the heritage of the individual. Herein I speak of what I know. For eighteen years such a physical examination has been conducted, and a direct oversight has been exercised at the school with which I am concerned, by a Specialist holding the position of Master in charge of Athletic Activities. The results speak for themselves.

It has been said that Boarding Schools develop athletics at the expense of class work, and, while I take issue with the statement, I may say that I am not surprised that it is made by those who do not know all the facts. The truth is that at the Boarding School, where the boy is under the direction of the school for twenty-four hours in the day, athletics have found a desirable place in a regulated time-table, with the result that by comparison with the average Day School they appear to be more important. What has happened is that the Boarding School boy has reaped the benefit of an organized major play hour, and is much the better for it. His life is full, but regulated, with from five to five and one-half hours of school work in the day time and two in addition at night under supervision.

My own experience has been with boys. I realize that I address those who are concerned with the problems of the girl as well. What I have said of group games can be made applicable for girls in school. If I say no more it is because I realize that I have had too little experience to justify me in speaking. This much I would say, however, that I am not at all sure that the more robust games for girls are of benefit either to the individual woman or the future race.

Our subject is concerned with child life. Nevertheless may I be permitted in conclusion to express the hope that some of my listeners may realize that play and exercise is the need not only of boys and girls, but also of men and women. A recognition of this truth for ourselves will increase our happiness and efficiency. We should do our part also, in creating a public opinion that will lead to the provision in all communities of larger facilities for athletic recreation for our boys and girls after they have left school days behind them and have become the men and women of their generation.

## The Church and Social Hygiene

A Paper read by Canon C. W. Vernon, General Secretary of the Council for Social Service of the Church of England in Canada, at the Annual Meeting of the Canadian Social Hygiene Council, at Ottawa, December, 1923.

**B**ECAUSE the Church believes in God the Father and Maker of all, and that man was made in the image of God, she is convinced that the process of reproduction gives man a share in the creative work of God, and that this is to be regarded as a sacred act and a solemn responsibility.

Because the Church believes the Present to be the Parent of the Future as well as the Progeny of the Past, she is convinced that a solemn responsibility rests upon each succeeding generation to hand on the sacred gift of life, pure and undefiled, and, as much as may be, strengthened and enriched.

Because the Church believes in the Incarnation of the Son of God, she is convinced that the human body is to be honoured, not despised; to be lifted up, not trampled upon; to be hallowed, not degraded, and that its natural functions, exercised in accordance with the Will of God, are honourable and healthful.

Because the Church believes that our bodies are the temples of the Holy Ghost, she is convinced that the utmost in purity, strength and beauty is required of the shrines of such a Presence.

Because the Church believes that, because of His all-seeing love, "God made them male and female", she is convinced that normally comradeship between the sexes is part of the divine plan, each being dependent upon the other for much of the interest, the inspiration and the joy of healthy natural life. She will, therefore, in increasing measure seek to promote healthy natural friendships among, and healthy recreation in which both sexes join, for the young men and the young women of this restless age, and among all the perplexities of our modern life.

Because the Church believes the words made His own by the Incarnate Son of God, "For this cause shall a man leave his father and mother, and cleave to his wife; and they twain shall be one flesh", she is convinced that the union of the sexes in true marriage, a union of spirit and mind as well as of body, is one of the greatest experiences into which man and woman can enter, and that this entrance into the holy of holies of sex life is indeed sacred and sacramental, a fitting symbol of that great



spiritual union, "the mystical union that is betwixt Christ and His Church".

Because the Church believes that God has only one law of purity and one standard of morality for both sexes, she is convinced that she can never demand (nor should the law of the land demand) less of her men than of her women. From the bridegroom who expects his bride to come to him with virgin body, the bride has an equal right to require that her husband-to-be shall bring to her a healthy virgin body, and, as far as may be, a virgin heart and mind, and subsequently shall be as faithful to his marriage vows as she to hers.

Because the Church believes that the highest type of sexual love is not founded upon bodily passion alone, but is in its essence an entering upon an unselfish and lifelong comradeship, she is convinced that Christian Marriage is indeed "for better, for worse, for richer, for poorer, in sickness and in health, to love and to cherish, till death do us part", and therefore, as she solemnly pronounces, using the words of her Lord, "Those whom God hath joined together let no man put asunder".

Because the Church believes that marriage is so high and holy an estate, she requires of her children that normally "the solemnization of Matrimony" shall take place in the House of God; she provides that every enquiry shall first be made of their friends and neighbours as to whether there is "any just cause, why they may not lawfully be joined together", and of themselves whether "either of you know of any impediment (surely communicable disease is such an impediment) why ye may not be lawfully joined together in matrimony", and she requires that their mutual pledges shall be exchanged before God's altar and in the presence of His priest.

Because the Church believes that the normal completion of healthy and honourable marriage lies in fatherhood for the man and motherhood for the woman, she prays to the Father and Creator of all; "Bestow, we beseech Thee, on these Thy servants the heritage and gift of children, and grant that they may also live together so long in godly love and honesty, that they may see their children christianly and virtuously brought up to Thy praise and glory, through Jesus Christ our Lord." She evidently considers that for normal healthy young married couples the purposely childless marriage is a crime against the State and an offence against God.

Because the Church believes in the right of the child to permanent loving care from both a father and a mother and that marriage involves the setting up of a Home, she is convinced that the Christian standard

is the lifelong union of one man with one woman to the exclusion of all others.

Because the Church believes in the lofty purposes of sex and the hallowed character of sexual union in Christian Marriage, she is surely convinced that the youth of both sexes should be reverently and sanely instructed, preferably by their parents in the sacredness, the meaning and the purpose of sex. As Dr. A. Herbert Gray puts it in "Men, Women and God". "The first essential equipment for a right journey through the country of sexual experience is that we should know the truth about our bodies—those temples of the Holy Ghost—and should understand the meaning of the emotions and desires which connect themselves with our physical constitutions."

Because the Church believes that poor housing is a deadly foe to the home; that undernourishment, bad air, lack of exercise and neglect dishonours the bodies of our fellows; that too long and too strenuous toil and lack of healthy recreation rob life of the power of enjoyment; that evil environment, evil comrades, vile pictures, vile plays and vile books corrupt the mind, she is profoundly interested and concerned in the manifold problems of social welfare and social work.

Because the Church believes in the love of God and the redemptive power of Christ she recognizes that, as "mother Church", she must take up the work of rescuing those who have fallen (whether they be fallen women or fallen men) from the paths of virtue, ever seeking alike "to raise up them that fall" and "to beat down Satan under our feet". She is convinced that moral rehabilitation to be permanent must be accompanied by spiritual restoration.

Because the Church believes in the redemption of the human body, she is deeply sympathetic to all efforts to conquer and to eliminate disease in every form.

Because the Church believes that man is not material body alone, but a trinity of body, mind and spirit, she is also convinced that B. D. of the soul has to be reckoned with and that, if by the efforts of science venereal disease of the body becomes a thing of the past, immorality would still be a way of death, and purity of body, mind and spirit a path of life and joy and love.

Because the Church believes that love, not fear, is the greatest thing in the world, she is convinced, to use the words of Bishop Lawrence, of Massachusetts, that "It is tawdry morality that would found the new moral responsibility in sexual life upon fear. It is degrading and unworthy monogamy whose slogan is only prudence. On honour and

social responsibility, and not on enlightened cowardice will be squarely placed the burden of the sex ethics of the future".

And finally, because the Church believes in the supremacy of the spiritual, she is profoundly convinced that she has great responsibilities towards the whole Social Hygiene Movement of to-day, a responsibility to inspire its leaders with lofty spiritual zeal and devotion for their great White Crusade; a responsibility to interpret the greater knowledge of to-day in sex hygiene and sex psychology in keeping with her historic standards of the sacredness of personality in every case, of absolute continence and chastity before marriage and of absolute fidelity after that holy and lifelong union has been solemnized and consummated; a responsibility to see that her parents, teachers and clergy, avail themselves in the training of the young, both of the deepest spiritual teaching on Purity and Marriage and of the best results of modern scientific knowledge upon sex, and that her social workers employ alike the riches of spiritual experience and of scientific knowledge in their preventive and rescue work.

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## Industrial Health\*

By FRANK L. MCCARROLL, M.D., M.O.H.

**M**ORE and more each day it is becoming a recognized fact that industrial efficiency is not an engineering problem alone, but that it is also a medical problem. Employers are becoming cognizant of this fact and are turning their minds to the human factor in industry. From past sad experience they are finding out that the human factor is as important, if not more important, than the mechanical, and needs medical supervision surely as well as the machinery and equipment which go to make their industries need mechanical supervision.

At present this work must necessarily be carried on by employers who have a keen foresight of their industry and its health, both financial and physical.

The Spanish River Pulp & Paper Company have this foresight and are among the first in this province to carry on this work. Is it not pleasing to note that these men who, apart from our field, realize this necessity and go ahead to carry out a scheme of industrial health?

I am confident the time will come when medical students will look upon this as a necessary part of their training, and The Faculty of Medicine will include in their curriculum the study of industrial hygiene.

Edgar L. Collis, in his retrospect of prehistoric history, writes: "Industry may be considered as an outward and visible sign of the progress of human intelligence, and the milestones along the road—the stone age, the bronze age, the iron age, the machinery age—gather additional interest when considered as the stages in the evolution of the mind . . . . The statement may be made that the intelligence of a race is measured by its industry and that the primary 'raison d'être' of industry is safety and health. In other words, industry is the means human intelligence employs to insure the existence of the race." Therefore, it is apparent that one purpose at least of industry is the improvement of living conditions and the health of its people struggling along for existence.

The management, therefore, who take up this industrial health work are showing to their employees their interest in the health and happiness of their people and are making a great effort towards their comfort in this life.

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Read at the Ontario Medical Health Officers' Convention held at Toronto, Ontario,  
May 21, 1924.

Allow me a little time to tell you what our Company has done along these lines:

The Spanish River Pulp & Paper Mills, Limited, have three mills: one at Sault Ste. Marie, Ontario, one at Sturgeon Falls, and one at Espanola. The last mentioned is purely a company town where all the houses are owned by the Company and rented to the employees at a moderate rent. There are about 4,100 people represented in the community.

The management of our Company are at all times open to receive suggestions, and if the doctor and the men ask for anything that will benefit the health of the employees, the request is sure to be granted.

There is in existence what is known as "The Mutual Interest Board" which is composed of equal representation from men and management. This Board grew out of the annual conference held in the Soo office in May, 1922, at which time new agreements were signed covering wages and working conditions for twelve months. The labour organizations elect their representatives on this Board, and the management representatives are appointed by the General Manager. The Board meets every three months at one of the three mills and discussions on matters of mutual interest may be brought before the Board by representatives of men and management.

Among the things which have been studied by the Board and on which recommendations have been made to the management are Apprenticeship System, Pensions, Vacation System, Suggestion System, First Aid, and the Community and the Plant Nurses. I may say that this Board has always been behind any suggestion I have made in regard to the health of the employees.

#### MEDICAL SERVICE

##### *Physician*

The Company has a contract with the physician in charge to look after the health of the employees. This contract system of necessity brings the employees and their families often to see the doctor, and for this reason disease is seen early and stopped if at all possible. Contagious diseases are also seen early and as a result are soon put to rout. The physician, then, is in close touch with the management and men and looks after, not only the health, but the sanitary supervision of the plant and the town.

##### *Nursing Service*

In the plant itself there is a qualified industrial nurse, and in the town a community nurse—both trained in public health and the nurse in the

plant with industrial experience as well. These nurses work under instructions from the physician.

#### INDUSTRIAL NURSE'S WORK

##### (1) *First Aid and Infection of Wounds*

Her work does not consist in treatment, but in first aid alone, which is carried out under a doctor's orders. Everyone, who while working, gets the least abrasion of the skin must report at once to the nurse for dressing, and each day thereafter until he is discharged. If the case requires a doctor the dressing is done at the office and, if necessary, he may be placed in the hospital, which is close to the plant and fully equipped and ready at all times for emergency. Standing orders from the physician determine which cases will be seen by him.

By this early dressing of wounds infection is practically nil and to prove this to you I will quote some figures which have been compiled for the past eight months, as follows:

##### (a) *First Aid*

Lost time accident cases.....	63
Days lost by same.....	982
Minor cases first aid treatment rendered	1115
Subsequent dressings.....	1088

It should be noted that this shows an average of about 2 dressings per case.

##### (b) *Infections*

Only one case of infection developed in all above cases, causing 61 days' lost time. This was the only case of injury where instructions to report to the dispensary were not followed. Under this system of immediate first aid, infection represents only 1.6% of all lost time accident cases and 6.2% of all lost time in the mill. Compare this with experience during ten months under the permanent safety system only, from October 1, 1922, to August 1, 1923, where infection occurred in 12½% of all accident cases and caused 21% of all lost time, and you can readily see the value of the plant nurse to the industry.

##### (2) *First Aid in Sickness*

All men with any symptoms of illness are encouraged to report to the dispensary at once. The industrial nurse sees them and any presenting suspicious symptoms are either directed to the doctor or asked to return at the time of his daily visit to the dispensary. This has resulted in bringing the physician and patient together earlier in the illness and shows itself in reduced loss of time from work.

The nurse's value is largely determined by the extent to which the



employees use her services. Although few came at first, the number of cases of sickness reporting now exceeds considerably the number of cases of accident. It is our experience that the men do not abuse this dispensary privilege.

The plant nurse, coming in touch with the employees each day, is able to give advice in matters pertaining to health, thus doing a great deal of educational work. Her experience and special training make it possible for her to detect symptoms of illness and to refer such cases to the doctor or to give first aid in minor ones. For instance, during the eight months' period the plant nurse relieved such ailments as boils, sore eyes, sore throat, etc., under standing orders from the physician, to the number of 212 cases and referred to the doctor 94 cases for diagnosis and treatment. In this way, then, she is an asset to the industry by preventing lost time through sickness as well as accident.

### *(3) Home Visiting*

She also visits the families in special cases and 33 such visits have been made. Close co-operation with the community nurse makes it possible for the plant nurse to advise her regarding the absence of an employee due to sickness.

Where an employee is absent from work for two successive days the case is referred to the community nurse, who visits the Worker's home. She is in no sense a "detective" and these visits are made solely for the purpose of being of assistance to the man and his family. Frequently the nurse is able to help in carrying out the instructions of the doctor, by showing some member of the family how to do what is necessary. Sometimes her visits is a means of bringing the doctor into touch with the family and the case. She may also find some condition in the home which has a direct bearing on the case, and without which knowledge the doctor might be hampered in his treatment of it. These referred visits are useful also as a means of introduction. The nurse becomes acquainted with the families of the employees and by her tactful manner and expert assistance creates confidence which later reflects itself in a ready willingness on the part of the man and his family to tell their troubles to the nurse. One woman tells her neighbours about the nurse's visit and soon others turn to her instinctively for advice and help and talk freely with her, thus making it possible for her to be of real service in a constructive way.

During the eight months the workers have advised the plant nurse of 182 cases of sickness in their homes. These were referred to the community nurse who visited them at once, but, through the plant nurse the contact was made earlier than would have been the case in her absence.

(4) Valuable records have been built up by the plant nurse, showing causes of lost time by employees with a view to preventing as much as possible of it.

They are based largely on absentee visiting. These records show:

(1) That the men now lose about four times as much time from sickness as from accident.

(2) These sicknesses are not occupational. This does not prevent the Company from making the attempt to reduce them.

(3) This lost time from sickness during the eight months' service has been at the rate of 4.5 days per man per year, comparing very favourably with a general experience of from 6 to 17 days per man per year.

Eight months' work can not show what the permanent decrease in lost time will be, but the management considers the results of sufficient importance to warrant an early extension of this health program to include initial and periodic physical examination of the workers in the plant.

The Division of Industrial Hygiene state that the records of sickness of the Spanish River Company are the best that they have received.

#### *Community Nurse*

This health work is carried out in a town where the Company owns the townsite, dwellings, etc. The industrial health program is not effected by this arrangement, as shown by the fact that the mills at Sault Ste. Marie and Sturgeon Falls, which are not Company towns, have developed a similar program, but the general community health work is effected in that, since the Company is concerned about the health of the people there, the two phases of the work are more closely allied with benefit to both. This shows itself in reduced lost time among workers on account of illness at home. Although the winter months always show most sickness, the amount of lost time among the mill workers on account of sickness at home was not greater during these months than during the last four months of 1923.

The community nurse in her work covers a very large field. This work is described because here it overlapped with industrial visiting to such an extent. Each phase of public health work has in view the same ultimate end—the building up of a healthier and happier Canadian people; but for purposes of classification the community nurse divides her work into the following groups: pre-natal, pre-school, school adolescent, and adult. Through home visits she meets the mothers and has opportunities to give advice and assistance to them during the pre-natal period. By this means she is frequently able to refer to the doctor cases where necessity for medical treatment is indicated.

In the pre-school age, by means of well-baby clinics, home visits, and consultations she is able to be of great assistance in preventing illness among the children during the first four or five years of life. Habits formed at this time prevail through the later years and results of improper feeding, bad teeth, diseased tonsils, etc., if not corrected early, often require much more drastic treatment in later years.

With the school children she continues the work begun in the pre-school period. She visits each of the schools regularly, devoting about one-half of her time to this work. The children are examined and where treatment is necessary the nurse advises with the parents in the matter. She is constantly alert to the first symptoms of communicable diseases and sees that any such cases are properly looked after at once, thus helping to prevent the spread of such diseases.

As an example of what work a community nurse can do, I will quote some figures for the past four months. Our nurse, in that time, inspected 3,633 children, referred to the doctor 353, to the dentist, 274, and made 1,415 home visits.

Dental, throat, eye and ear clinics have already rendered services of great value among the school children in other places throughout the province and I merely dwell upon it here as it is part of the industrial scheme, as the management are anxious that all the children of their employees be kept healthy and well, to enable them to follow in their fathers' trades in the plant.

A successful health campaign requires co-operation and as no work of this nature can be one-sided, for this reason I bring in this fact which is perhaps unique. The management of our Company are anxious that each child should receive a good education. For this reason much money is spent on education, as education is, after all, the biggest industry in any country and more money is taken from the coffers of our treasury for this than any other item. The teachers of our schools co-operate in the work we are carrying on. They keep records in the schools of time lost by the pupils from sickness or otherwise. It is shown in a combined report made by the medical supervisor and the teachers.

In a school population of 656 children the figures for the month of February are as follows:

Total number of pupils.....	656
Total number of absentees.....	503
Total number of pupil school days.....	12,876
Total number of days lost from sickness.....	1,019 or 13.4%
Total number of days lost from other causes.....	853 or 11.35%

Needless to say, the school reports brought out many interesting

points and showed that in schools with further co-operation on the part of the teachers, nurse, truant officer, and our employers this lost time could be cut down greatly and thereby each school day become a greater asset to the children, to the parents, and to the industry than heretofore. I have a copy of the above report with me if anyone would like to see it.

The management also, through and with the School Boards, have engaged the services of a dentist for one day a week to take care of the children's teeth and from the following report you can gather the amount of work done in this regard, and judge what good results will be forthcoming:

Period—six months, ending March 31, 1924.

Amalgam Filling, 180.

Cement Filling, 32.

Gutta Percha Filling, 54.

Temp. Filling, 15.

Porcelain Filling, 36.

Putrescent P., 74.

Devitalize, 48.

Root Filling, 28.

Pulp Cap., 60.

Prophylaxis, 13.

Local Anaesth., 207.

Extraction, 219.

Total operations, 956.

A more recent development is a monthly clinic for treatment of children with defective sight. This is conducted by Dr. E. C. Hill of Toronto who comes one day a month to consult with the local physician regarding cases referred. This also provides an opportunity for all adults to have their vision attended to.

The problem of prolongation of life is a most engaging one, and has enlisted public interest from biblical times to the present day. Among the ancients search was made for some elixir of life, records of which appear throughout history; but to my mind the best means at our disposal is periodical health examination. Our management have under consideration the examination, yearly, of all their employees, with the idea also of protecting the weak and aiding the strong. A periodical examination of every worker in the plant is a practice which needs no explanation. The question only is how frequent those examinations ought to be. Professor Bleky thinks that in lead trades a bi-weekly examination is necessary, but this will vary with each industry and with the findings on initial examination, and must necessarily be worked out by the plant physician.

Here again the Mutual Interest Board will be of value in making clear to the employees the object of the periodical examination—that it is not the purpose of the management to do away with the men who are not fit physically, but to aid them and place them in proper positions in the mill.

I think we may look forward to the time when each industry will, of necessity, have a plant physician and I think that such a physician should go into the industry and learn the trade from the bottom up so as to be thoroughly familiar with each phase of the work and its bearing upon health. In this way he shall be able to point out the best methods and note their results from a medical standpoint.

Industrial health should be regarded as an investment, not only because it reduces lost time from illness and other causes of absenteeism, diminishes labour turnover, prevents accidents, and generally safeguards the health of workers, but also because it advances the spirit of good will, loyalty and co-operation which are of essential and fundamental importance to the attainment of the fullest measure of success. This has been the experience at our plant.

You will agree with me, then, that such work as the above mill carries on will prevent unnecessary pain and suffering, remove much worry and anxiety and save money for any industry. In addition it will most assuredly help to prolong the life and increase the happiness and pleasure in life of employees and their families. Their children will have better opportunities to become healthy, active and happy men and women, and to bring to the future work of their lives greater vitality and more abundant energy of mind and body, because of the health habits formed in their early years.

The object of attaining the foregoing results is well worth working for and no system of Industrial Relations should be considered sound and permanent unless the visions of such future benefits find a permanent place in the hearts and minds of its founders. In all our plans and actions we must continue to be guided by the determination that: "What comes to us as seed, we will pass on a blossom, and what comes to us as blossom will be passed on in the form of perfect fruit", else our work is all in vain and succeeding generations will trample it under foot.

In conclusion I wish to take this opportunity of thanking the Provincial Board of Health, especially Dr. McCullough, Dr. Cunningham of the Division of Industrial Hygiene, Dr. Hugh Johnston, District Health Officer of Sault Ste. Marie, and Miss Mary Power, Director of Child Welfare, for the past and to solicit your help for the future.

I thank you.

Espanola, Ont., May 9, 1924.

# Labour and Its Relation to Social Hygiene

By J. A. P. HAYDON

*Representing the Trades and Labour Congress of Canada*

LABOUR recognizes that a clean, healthy body is productive of a healthy mind, and throughout the entire history of the trade union movement of this country hygiene, both industrial and social, has occupied a very important part in its activities.

It is difficult to always clearly define between industrial and social hygiene, the effects and causes of each being closely interlocked.

Whilst agreeing with the extreme importance of the subject upon which a number of papers have been read, namely, venereal disease, all of which have undoubtedly added materially to the knowledge of the causes and effects of this destructive disease, and approving of the establishment of clinics for the treatment of those suffering from the disease, yet, from our standpoint, it would seem advisable for this Council to use its good offices and influence not only for the giving of knowledge and treatment as to the actual disease but in supporting measures which would remove causes somewhat more remote and yet definitely lined up with the question of social hygiene. Labour was amongst the first national organizations to press for the establishment of a separate ministry of health in the Dominion Government, and this has been recognized in the framing of the law by definitely providing a place on the advisory council for a representative of Labour. Speaking with no technical nor medical knowledge, but merely trying to present to you the views of the mass of wage earners of this country, I feel justified in using the rest of the time at my disposal in referring to several of the numerous subjects that appear from Labour's viewpoint to be part of the broader subjects of social hygiene.

Fundamentally amongst these is the housing problem. Environment undoubtedly plays an important part in everyone's life. During the peak of regular employment and greater earning power, immediately following the armistice, the housing shortage became acute in nearly every country of the world. This is generally attributed to the lack of normal building activity during the war, but a more material factor in our estimation was the general movement to take advantage by the workers of the improved economic conditions to secure separate homes for themselves. With the deflation of wages and unemployment we already note the lessening of

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Read at the Annual Meeting of the Canadian Social Hygiene Council, December, 1923.



housing demand, and without doubt a return to the overcrowding conditions of pre-war days. An eminent judge, dealing with this matter said, recently :—

“Back of each story (he was talking of the work of the domestic court)—is the hopeless struggle of fathers and mothers to get children out of the unwholesome environment, an ambition that is baffled in almost every instance by the inability to pay higher rents due to low wages and irregular employment.”

There can be very little question that bad housing is responsible for many of our social problems, leading as it often does, to a laxity in moral standards and too often bringing about a hopeless, disparaging mind of—“What’s the use”.

The various commissions which have investigated conditions in the homes of the miners recite, in many instances, the lack of even primary sanitary arrangements, impossibility of providing proper separate sleeping accommodation for grown-up members of the family, and the absolute absence of any means for taking baths, etc. By the lack of these arrangements members of the family become exposed one to the other and all serve to emphasize the importance of dealing thoroughly with the housing problem.

In case of infection all of these conditions must necessarily play an important part in spreading the same. If social diseases are to be successfully combated then, of necessity, consideration must be given to these problems.

Turning to another phase of the subject, comes the white slave traffic. This is not only national but international in its scope and therefore closely linked with our immigration problems. The League of Nations is doing wonderful work in grappling with this question, but all the forces and influences of social hygiene workers in all countries are necessary if this curse is to be eliminated. Fostered, as it undoubtedly is, by those with wealth and leisure, this exploitation of womanhood is very difficult to combat and it needs the greatest care and watchfulness on everyone’s part if it is to be prevented from becoming a menace in this country.

Experience has shown that great difficulties exist in maintaining a high moral standard amongst girls employed by Orientals and for a number of years the Trades and Labour Congress of Canada has carried on an agitation for the prohibition of the employment of white girls by Orientals, believing that if marriage does take place no permanent good will come to either the persons or the country through the fusion of the yellow and white races.

Closely allied with the white slave traffic is the illicit traffic in drugs and in this the Oriental also plays a prominent part. Whilst in Vancouver recently I had the opportunity, though not a pleasant experience, of visiting Chinatown. I was present with the police when an opium den was raided. Words will scarcely reveal the filth and degradation which prevails in this section of Vancouver—one of the fairest cities of the Dominion. The police, apparently, had previous knowledge that a certain house was being used as an opium den. When the detective knocked at the door bells were heard throughout the block and Chinamen could be seen scurrying out of doors here and there. The detective, who apparently knew most of the Chinamen by sight, spied his men and took after them. They were finally captured and brought to the place where the opium was being smoked. Three doors had to be broken in and when we reached the top of the stairs the opium lamps were still burning. Five pipes and lamps were secured and a quantity of opium. The place contained no furniture whatsoever, but a few bunks were built in the small rooms. Filth was everywhere in evidence. The place was dark and dreary. It contained a telephone and a system of electric bells warned the operators of the place of the approach of the police. Our quick arrival from a side street in a private car prevented warning on this occasion. In one wall a small opening had been cut and a ladder constructed so those in the joint could make an exit while the police were entering by the stairs. No one was in the joint when we reached it, but the two Chinamen caught pleaded guilty and were fined \$50 the following morning. I am relating this incident to show what cheap Oriental labour has brought to Canada. However, this very serious menace of illicit traffic in drugs is one in which all citizens of Canada should unite to stamp out forever.

We strongly believe that the policy of exclusion of the Orientals with strict control of those already here—a policy stressed by Labour for a great number of years is not merely an economic problem, but one that in many ways comes very close to the work of the Canadian Social Hygiene Council.

In innumerable ways Labour has always endeavoured to do its part in arousing interest in the problems of industrial and social hygiene—in demanding strict supervision and sanitary barber shops, by its endorsement of the grants for free clinics for the treatment of V. D., the endorsement of the passing and amending of the Opium and Narcotic Drug Act, the demand for the medical examination of those engaged in the preparation and handling of foodstuffs and especially the Orientals, research work into the causes and effects of industrial diseases, etc., etc.

Before concluding I would like to refer to one other important subject which on the surface may seem far removed from the purposes for which this conference is being held, but on closer examination will be found to be of vital importance and intricately connected with the objects of this Council. I refer now to the eight hour day question. Workers whose entire vitality is sapped through their daily labour are ready prey for any and all diseases. Workers, whose outlook is confined in the narrow rut between the factory and sordid homes are liable to seek relief through unnatural excitement. Workers, whose minds are dulled by the monotony of long hours and the repetition of machine operations cannot be expected to produce a race that any country would be proud of. If these things are not to be with our modern intensified industrial system, then the Canadian Social Hygiene Council must take cognizance of the claims of the workers for a legal limit of their work day which will insure to them the fullest opportunity of development of both mind and body.

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# The Waiting Shadow

*(Continued from July number)*

## CHAPTER III.

The day on which Petersen usually came arrived, but Petersen did not come. She waited and waited and was ill with longing. She found it hard to do her work. Her thoughts were all with him. Her anxiety increased as the day wore on. A whole week passed, and the next week besides, and still he did not come. Could he have got ill? She did not know. Everytime the door was opened she hoped that it was he. So it went on every day and week after week. Her mental agony grew daily. She suffered most on those days of the week on which he had been in the habit of coming. Could he have met with an accident? She looked through all the papers which came to the restaurant, and sometimes her heart beat as though it would break while she was going over the news columns.

The mail brought a letter from Olaf. He wrote as was his custom—a mournful tale of never getting any letters from her. It was hard to love a girl who seemed to care for all men equally or perhaps loved someone else more. Yes! It was her turn now to know what it felt like. He never could have suffered the pain that she was passing through now. She folded the letter up. Everything seemed to pass in a dream. All was vague—except Petersen. Why did he not come? Ah! Why did he not come?

Three weeks after she had been with Petersen one of her feet began to swell with considerable pain. She did not speak to anyone about it and kept on the go as long as she could; but, at last she had to give up and let her name be placed on the sick-list. A doctor was telephoned for. He came, looked at the foot, and ordered her to try an ointment and hot poultices. If she did not get better she was to let him know. Little by little the pain lessened and the swelling went down. She was able to get up and go to work again.

One evening she had taken a bath and changed her clothes, when she became aware of little red spots on her neck and arms. She bent down and passed her hand over her shoulders and her chest. They felt like blisters, especially on the back. Then she heard someone running up the stairs. Johanna came in. Ruth jumped into bed, turned out the light, pulled the bed clothes up and pretended to be asleep. But sleep was

impossible. Her head ached and pained and her thoughts swept to-and-fro like a tempest. Had she got 'The Wicked Disease?' She tried to remember everything that Johanna and the other girls had said about Karen and her illness. She summoned Karen before her imagination till she seemed to see her standing in front of her. The next moment she only seemed to see her eyes. They never were steady, until all at once they seemed to stare at nothing, and then they began to rove round again. She had never before tried to discover what this strange look meant. Could Karen have been suffering tremendously? And she was so cold towards her! Then she began to think of Karen's red spots. No, they were not like this eruption which had broken out on her. She passed her hand again over her neck and arms, and at the same time tried to picture Karen. Then all at once it flashed upon her that this might be measles. Yes, certainly it was measles. The pain in her head lessened to a certain extent. How could she have been so scared? It was impossible to think that she had really got this appalling disease. How could she have got it? For a few moments her mind was at rest. She felt the pressure at the heart which always came when she thought of Petersen. No, it was impossible! He, diseased? She almost collapsed as all her mind was centered on him. Why had he absolutely disappeared? Had he got ill? But then he would have written. Even if he had not been able to write himself, he could have got someone to have written for him. Why did he not do that? Was it because he was afraid to let anyone else know that he was engaged? Engaged? Her mind checked itself and began to think over this word in a new light. No, he had never spoken of an engagement. He always was wanting to know if *she* loved *him*. Surely he could not have been so anxious about that unless he had loved her—he who always seemed so pained that she did not love him more. The pain in her head became bad again with the burning heart-anguish. It spread, passed into her shoulder-blades and down the back. It burnt and throbbed. Could this be only measles? Anguish overpowered her so that she could not think. Was there not some other epidemic which caused fever and an eruption? At best it occurred to her that it might be scarlet fever—yes, it must be that. She kept thinking of scarlet fever and how she could have got it. It was terribly infectious. You could get it in all sorts of ways. It was certainly scarlet fever which had attacked her. How could she have been so frightened as to think of "The Wicked Disease?" She could not have got that from anyone. Then she thought of Petersen again. She remembered how splendid and strong he was—how could she ever have had that other terrible idea? If he had been diseased he would have known it, and have taken every care not to hurt

another. No one with such an illness would ever willingly run the risk of infecting others. It was impossible that anyone should be so devoid of conscience. But Karen! The man who infected her must have known that he had the disease. Her mental agony grew. Whatever should she do? All at once her mother came into her mind, and her terror increased. What should she do if she were ill? Where should she hide herself? The grief and shame would finish her mother. Whatever should she do with herself? She seemed to feel the roof dropping down on her with deadly weight. She felt that she would be smothered.

It had become half-light in the bedroom. She sat up in bed and looked at the eruption. The pain in her head scorched and burnt,—it was no wonder that people went mad. She would have to try not to think of this any longer or she would go mad too. Later in the day she would have to go to a doctor and find out what was the matter with her. The suspense was unendurable . . . . . Again her thoughts began. If only the doctor pronounced it Scarlet Fever or Measles. Never again in her life would she plunge herself into this agony. She would go out to service in some good, quiet home and spend all her free time at home with her mother. Her thoughts, heavy with sleep and vague, roamed to the little room and kitchen of her mother. At length they ceased. She had fallen asleep.

When Johanna called her she jumped out of bed and flung herself into her clothes. All day she thought of only one thing—to finish her work and get to the doctor. When she was ready and was going to start, she felt she could not go. She sat down to think. It struck her that she ought to go to a specialist to be quite sure that he made no mistake. She remembered passing a door with the sign, "Specialist in Diseases of the Skin." She had noticed this because it had reminded her of what Johanna had said about "The Wicked Disease". She remembered that under the name had stood "Office Hours, 5 to 6.30 p.m." She could not bear the idea of having to wait long. She would have to go early to get there before others came.

The clock had struck five when she arrived. She stopped at the door. Her heart beat hard and rapidly. No, she could not bring herself to go in. She wanted to sink beneath the ground. What was she to say to the doctor? Was she to tell him all? At this moment someone came out, she stepped back a few paces along the sidewalk—turned back to the door—stopped. She could not concentrate her thoughts. She wandered down the street. She remembered the agony of the preceding night. She thought her head would burst. Whatever it might cost, the suspense must be ended. She pulled herself together and went in.

Many were already in the waiting-room. She sat down in a corner—



did not know what to look at—took a paper which lay on the table and sat down again in the corner. One after another, people kept coming in. Those whose turn it was were called out. At last her time came. "Would you kindly step this way?" She felt the floor sink under her. The doctor turned the key of his office door and invited her to a seat.

The examination was over. The doctor asked her whether she could pay for medical assistance, and whether she had any place to go where there were no children and where she could take all needful precautions. No, she had nowhere to go. "Then you must go into hospital. They will treat you well there," he added kindly, when he saw the look of despair in her eyes, which gazed at him lifeless and rigid. "You can get better if you take all the necessary treatment, but you must leave your position in the restaurant at once. Can't the man whom you have been with help you?" She continued staring at him without saying a word. He sat down and wrote a note. "Take this to the Health Department tomorrow. They will tell you where to go."

She took out her purse and asked him what she owed him. "We won't say anything about that" he replied, as he opened the door with a kindly look. The next patient stepped in.

*To be continued next month.*

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# The Sanitary Inspectors' Association of Canada

## FOOD LEGISLATION—ADULTERATION

By E. L. C. FORSTER, M.A., F.C.I.C., *Analyst in charge Food and Drugs Laboratory, Federal Department of Health, Winnipeg, Man.*

Read before the Winnipeg members.

**I**N primitive or pastoral states, no systematic sophistication was possible, commercial foods being unknown or undeveloped. There are several notices of ancient sophistication practised by the Greek and Roman traders, but it is from the middle ages that the most copious and interesting materials for a history of adulteration are obtained—a page of history but little explored yet,—abounding with curious facts, more or less illustrating the manner of the times.

The first general Act in England was that of 1860, previous to which date individual articles, such as tea, coffee, chicory, beer, and wine, were legislated for by special Statutes, the object of which was, for the most part, to prevent the defrauding of the revenue, the health of the purchaser, and the injury done to him, being somewhat less considered, although not lost sight of.

During the twelve years that the Act of 1860 existed, it remained practically a dead letter, the reasons being mainly (1) that it did not provide for the appointment of analysts, and (2) that it did not provide for the procuring of samples, this being left to private purchasers. In 1872, a new Act, covering drugs as well as foods, and providing for the appointment of analysts was passed, but it seems to have been scarcely more satisfactory than that of 1860. Complaints came in from many sources and led to the appointment of a Second Select Committee of Parliament to inquire into the matter of food regulation. The following extract from its report is of special interest: "While the Act has done much good, it has at the same time, inflicted considerable injury, enforced heavy and undesired penalties upon respectable tradesmen. This appears to be mainly due to the want of a clear understanding as to what it does and as to what does not constitute adulteration; and in some cases to the conflicting decisions and inexperience of the analysts. Your committee, however, are of the opinion that the Act itself is defective and needs amendment." The commission concluded their report by remarking that the public was "cheated" rather than "poisoned" by existing

adulteration. On this report was based the Act of 1875 which was amended in 1879, and again in 1899 is the existing law of England. It is interesting to note, that in this year, 1875, the first Canadian Act taking cognizance of adulteration of food was passed, and under it were appointed Public Analysts at Halifax, Montreal, Toronto, and Quebec. Later appointments were made at Winnipeg, Victoria, London, Ottawa and St. Hyacinthe.

In this brief review of the history of Food and Drugs legislation, I desire to show you that the special difficulties which we at present feel to attend the administration of Food Laws, have long been recognized, and have been to some extent dealt with. It is perfectly well understood, and is, I believe, universally granted, that the legislators concerned in exacting these laws and the officials employed in administering them, are simply desirous of getting at the facts and acting in the sole interests of truth. The imperfections which mark best of man's work are very pronounced in the case of new departures; and when it is remembered that the first attempts to systematically inspect food and drugs date no further back than 1872 for England (the Act of 1860 not including drugs) or 1875 for Canada, we cannot wonder if we have not yet succeeded in getting everything to run smoothly.

The first report on the working of the Food Inspection Act in Canada was issued by the Commissioner of Inland Revenue in 1876. The only reference to standards of quality is the following: "The English Act of 1875 leaves the responsibility of fixing the standard of milk on the analyst and with the information yet available, I apprehend that no other course can be prudently followed in Canada." A chief Analyst with assistants was appointed in Ottawa in 1885. This may be taken as the beginning of the present Laboratory Board. The adulteration of Food Act, dealing solely with food and drugs was passed in 1884, and amended so as to include fertilizers in 1886 with "The Adulteration Act". After several amendments, this was finally superseded by "The Food and Drugs Act, 1890".

If it is fondly imagined that a cursory examination by any one who could use a microscope or a test tube, would suffice to distinguish between the genuine and the fraudulent in foods, that assumption has now been entirely discredited, and it is recognized that a food chemist must be one of special training, and must give his whole time and thought to this special work.

Most of the analytical work falls naturally under two heads, which may be designated as police work and investigatory work, most of the work is of the first named order and is concerned with supplying the

evidence necessary for convictions in violation of the various Acts administered by this department.

The investigatory work is of no less importance, and has for its object the accumulation of such information regarding the nature of specific classes of foods as may enable standards to be defined and limits of variations to be fixed in accordance with the requirements of these Acts. Standards have been fixed for a great number of the most important food spices, and these standards will continue to be improved and made more definite by revision as our knowledge of the subject increases. One of the principal objections raised against the legalizing of standards for food substances is that Nature knows no such standards.

A potato does not cease to be a potato because it is small or poor in starch; or a bad cooker. Now a very large proportion of your food consists of articles which, like the potato, are natural products and for whose quality the vendor cannot in the strict sense be held responsible; vegetables, fruits, grain, of all kinds, spices, etc., may be cited as examples, and among manufactured foods intention and effort upon the part of the manufacturer will not prevent the occurrence of second rate bread, biscuits, jam, pickles, and a hundred other manufactured food-stuffs.

To find a minimum limit of quality below which these inferior articles may not be offered for sale means an increase in the cost of food to cover the waste which such legislation must necessitate. This argument is met by saying that it is not proposed to prevent sale of food-stuffs of inferior quality so long as they are non-injurious to health, all that is suggested is the adoption of an advertised standard to which all samples of that particular class of food must be referred. If offered for sale without any qualifying description, the purchaser understands that the article offered him is at least up to this standard. If not up to such standard, it is the legal right of the purchaser to be so informed at the time of purchase by a clean and accurate labelling of the goods. It may be answered that an acknowledgement of the inferiority of a food substance would prejudice it in the opinion of a prospective buyer, and compel its sale at a price disproportionately low in comparison to its real food value. I think this aspect of the case may be left to adjust itself in accordance with the law of supply and demand.

An objection of seemingly greater weight is that since it is manifestly impossible to fix a standard up to highest attainable quality, the legalizing of a practicable standard will result in deterioration of quality so far as the best grades of foods are concerned. The case of milk may be used in illustration. Records show we have milk of natural production in Canada varying in its fat content from 2.5 to 5.4%. If we make 3.5% a

legal minimum, we not only check the sale of the lower grades, but we eliminate the best grades from the market except in those rare cases in which consumers are willing to pay proportionately high prices for such grades.

The practical results of such a law would be either the adjustment of herds so that the average product would possess the legal minimum, or the sale of the farm milk to a corporation having facilities for its adjustment so as to fulfil legal conditions with greatest profit to the producer.

To this objection we must again quote the law of supply and demand as certain in the long run to effect equitable adjustment. There are those who hold that the inherent difficulty of deciding upon workable standards, i.e., such as would be at the same time just as effective, is so great as to put the whole subject outside of the pale of practicability.

It is true that most food substances and many drugs are of such a character that it is impossible in the present state of knowledge to define them positively, i.e., by exact and comprehensive enumeration of their constituents. It would seem that the best we could do in such cases is (a) to fix upon the most important components or principles and require that these shall be present in a certain minimum amount; (b) to recognize the unavoidable presence of worthless matter and fix maximum permissible amounts; (c) to combine these methods and fix limiting maximum and minimum; (d) require that the article be grown or manufactured after a definite manner or in a particular locality, thus ensuring a certain fixity of character. A few foods and condimented substances, and many drugs possess such definite composition as permits of their being positively described. There is a manifest satisfaction about the positive method of definition. It permits of direct analytical treatment on the part of the chemist; the identity of the species is past all doubt and the degree of purity of the sample itself is capable of quantitative expression. Unfortunately, such treatment is inapplicable to most foods and we have to be satisfied for the present, to identify and define these partially. I am inclined to believe that the objection we referred to is one which becomes less insurmountable as we, in a proper spirit attack the question. The fundamental principle to be kept in view is simply this: "There must be absolute good faith between buyer and seller. The buyer should be able to rely upon getting what he pays for, both as regards kind and quality.

#### *Results of the work of Food Laws:*

There is nearly unanimous opinion to the effect that food legislation has done much to improve the character of modern foods. It has done

this partly by calling attention to the subject of quality in food, thus causing people to think and talk about the matter, so that it is more difficult to sell low grade goods now than was formerly the case, but chiefly by giving the consumer legal redress against a dealer who sells to this prejudice. Improvement in foods on the market may be seen from some results of analysis:

Record of coffee: Percentage genuine—1876-10; 1880-43; 1884/86-42; 1891/92-51; 1899/1902-71; 1914-85; 1916-83; 1918-93.

Record of all samples:—percent genuine—1876-49%; 1880-72%; 1890-79%; 1910-95%.

The records of all countries which have adopted food and drug inspection tell the same tale of improvement in the character of these goods. It may be impossible to appraise exactly the value of this work in terms of health, longevity, or enjoyment of health to a nation, but there is no difficulty in realizing that the benefit is very great indeed.

The efficiency of food inspection depends upon many factors, the chief of which may be enumerated as follows:—

1. Number of samples examined
2. Intelligent work of local Inspectors
3. Publicity given to results of analysis
4. Vigorous prosecution of offenders.

Samples examined:

1890— 573  
1895— 926  
1910—4581  
1913—4028  
1917—4930  
1919—6136

At no time in the history of food inspection in Canada has the Act been more consistently enforced than at present.

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## Monthly Jottings of Sanitary Inspectors

The Secretary has written quite a large number of letters during the past month, but has not received many, consequently there is little news for this issue.

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Perhaps the scarcity of news is due to the holiday season. We hope that a number of our members will, if necessary, combine pleasure with work by being at the Convention. Much inspiration is often gained by discussing problems with the other fellow outside of the regular sessions at Convention time.

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Our latest addition to membership is Mr. W. H. Rau, of Kitchener, Ontario. Mr. Rau expects to be with us at our forthcoming Convention.

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The members will be interested to learn that the Annual Financial Statement duly audited by the Auditors shows a balance in the Bank, and on hand of two hundred and ten dollars, nineteen cents (\$210.19), at June 30th. This, we believe, is a very creditable showing.

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There must be a large number of Sanitary Inspectors, especially in the East, who have not joined us in the good work. Your Executive will welcome any help or suggestions as to means of interesting them. Our numbers are increasing, but not so rapidly as we might expect.

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The forecast for the Convention is, that we are to have a specially good programme of addresses, papers, discussions, etc., but there is not likely to be a large number of members from the West. We wish that our City Councils could see that it is desirable that their Inspectors should have the opportunity of meeting together periodically, to discuss the problems met with in their work.

## News Notes

Two interesting meetings were held in Hart House Theatre, University of Toronto, dealing with various phases of health, just subsequent to the meetings of the British Association for the Advancement of Science.

The first arranged by the British Eugenics Education Society on the evening of August 14th was presided over by Sir William Beveridge, Director of the School of Economics and Political Science of London. The speakers were Professor William McDougall, Professor of Psychology in Harvard University and Dr. Vaughan Cornish of the University of Manchester.

The second meeting was arranged by the Canadian Social Hygiene Council on the morning of August 15th. The chairman of this meeting was Dr. C. J. O. Hastings and the speakers were Dr. Lydia Henry, Warden of the Social Science Department of King's College for Women, Dr. John T. MacCurdy of Cambridge University and Mr. R. A. Fisher, Honorary Secretary of the British Eugenics Education Society.

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On the afternoon of August 11th in the Academy of Medicine, Toronto, a special showing of a moving-picture entitled "The Diagnosis and Treatment of Gonorrhoea in the Male" was shown for the benefit of the medical members of the British Association for Advancement of Science and Fellows of the Academy of Medicine in Toronto. This picture had been prepared by Col. Harrison of the Ministry of Health, Great Britain, for the National Council for Combating Venereal Diseases. The picture, designed for teaching purposes in medical schools, is probably the best of its kind as yet produced. This picture will, it is hoped, be available for medical schools in the near future. Interested groups in either medical schools or departments of health should forward inquiries to the Canadian Social Hygiene Council.

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In recognition of the far reaching developments of bronchoscopy in the diagnosis and treatment of diseases of the lungs and of esophagoscopy and gastroscopy in the diagnosis and treatment of diseases of the esophagus and stomach, the Board of Trustees and Faculty of The Jefferson Medical College, have created a new Chair to be known as the Department of Bronchoscopy and Esophagoscopy. Dr. Chevalier Jack-

son, formerly Professor of Laryngology in The Jefferson, has been elected to the Professorship of the new Department. Dr. Fielding O. Lewis has been elected to fill the Chair of Laryngology vacated by Dr. Jackson.

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The announcement was inadvertently omitted from the last number of the JOURNAL that the Rockefeller Foundation had appropriated the sum of Seventy-five Thousand Dollars to the Canadian National Committee for Mental Hygiene, this sum to be given to cover five years' work in Mental Hygiene. This generous gift is made on condition that a similar amount be raised from Canadian sources. The Canadian National Committee for Mental Hygiene is to be congratulated on the possibilities which this decision on the part of the Rockefeller Foundation opens up. It is understood that the money is to be used in financing various studies bearing upon the application of Mental Hygiene to school children.

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The Provincial Board of Health of Ontario have as usual a very good health exhibit at the Canadian National Exhibition, in the preparation of which a great deal of care has evidently been exercised. It is hoped that the Exhibition generally will break all records this year both from the standpoint of attendance and usefulness.

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## Social Background

### Health and Sanitation in Fresh Air Camps

**I**N October, 1923, a meeting of camp workers in Toronto was called under the joint auspices of the Child Welfare Council and the Neighborhood Workers' Association of Toronto. At this meeting a committee was appointed to draft recommendations in regard to the health and sanitation of Fresh Air Camps. The committee was composed as follows:

Miss Austin, Head Worker, Central Neighborhood House.

Dr. Cruickshank, Department of Public Health.

Miss Beith, Supervisor—Pre-natal, Infant and Pre-school Hygiene, Department of Public Health.

Miss Yeigh, Head Worker, St. Christopher House.

Miss Coxwell, Roman Catholic Big Sister Association.

Mr. Luck, Young Men's Christian Association.

Miss Held, Neighborhood Workers' Association, Bolton Camp.

The committee met and considered and revised the statement previously drawn up by a committee of the Central Council of the Neighborhood Workers' Association and presented the enclosed report.

#### (1) *Prior to going to Camp*

That all persons taken to camp be medically examined, at some time within a week of their leaving the city, the examination to consist of:

1. Examination for the discovery of infectious disease, skin disease or infected heads.
2. General physical condition of child so that advice re special care may be given. (The committee was of the opinion that the examination should include the taking of swabs.)
3. That a uniform card be used by all clubs, to be filled in at the time of medical examination, such card to include the name, address and age of the applicant, the party with which he is going and the medical recommendations of the examiner.
4. That all campers be urged to take a bath before going and that where possible, clean clothing be provided for the children when they reach Camp.

#### (2)

1. That every camp include a nurse or medical student, preferably the former, who will give individual and group instruction on health matters.

2. That at all children's camps, the children be weighed on arrival and departure, and that records be kept.
3. That visitors be discouraged from coming to camp; and that over-night and week-end campers be permitted only when accompanied by a medical certificate.
4. That there be a rest period of not less than one hour per day, shortly after dinner. One hour's rest period in the morning as well would be better still.
5. That no tea or coffee be served to children.
6. At least one pint of milk a day for each child.
7. That individual towels, wash cloths, soap and tooth brushes be provided by the campers or supplied by Camp.
8. A full bath oftener than once a week.
9. Thorough washing of face and hands before each meal and at bed time.
10. Drinking at least four glasses of water each day.
11. Night clothes to be either provided or insisted upon.

(3) *Eating Conditions*

1. That all water used in the Camp be tested regularly and that it be chlorinated unless supply is shown to be above suspicion. Expert advice re chlorination may be obtained from the Department of Public Health.
2. That every Camp use pasteurized milk for babies, and for everyone if at all possible. Public Health Department are willing to visit the farm from which milk is obtained and report to Camp on conditions.
3. That garbage pails be kept tightly covered and cleaned with hot water daily.
4. That there be daily inspection of ice boxes or other means of refrigeration.
5. That the kitchen and dining-room at least be properly screened.
6. That special attention be given to receptacles for milk, and that all milk for babies be kept cold and protected from dirt.
7. That tables should be carefully scrubbed and inspected after each meal.
8. That dishes should be rinsed in hot water.
9. That attention be given to airing dining-room after and during meals.

(4) *Sleeping Conditions*

1. That there be one story for sleeping accommodation.
2. That there be bed inspection every day, and where possible that beds be thoroughly aired in the sunshine. If wooden cots are used they should be sprayed with Lysol between parties, the joints being

carefully painted; mattresses should be sprayed, brushed and sunned; blankets shaken and sunned.

3. Either padded or filled mattresses be used, but in any case a few of the tick variety should be kept on hand for cases of enuresis, etc. Corn husks or straw make a good filling. All bedding to be raised from the ground.
4. That there be plenty of air in sleeping rooms. When permanent buildings are erected there should be a space of two feet between each bed.
- (5) *Disposal*
  1. That same type of latrine described in Bulletin No. 9, of the Provincial Board of Health, be adopted in all Camps.
  2. When toilets are not located in the same building as sleeping quarters, temporary provision for night should be made and carefully attended to first thing in the morning.
  3. Latrine toilets should be well removed from eating and sleeping quarters.
  4. Latrine toilets should be fly proof and the boxes light proof, and treated daily with a combination of crude oil and chlorinated lime.
  5. The importance of keeping all sanitary regulations should be forcibly impressed on all campers in their proper groups on arrival at camp.
- (6) *Miscellaneous*
  1. That canteens be discontinued.
  2. That adequate fire protection be provided.
  3. That in the event of new Camps being established or additions made to those at present in existence, the service of the Provincial or Municipal Boards of Health be consulted.
  4. That Camp inspection by the Department of Public Health be made to all Camps, including other than Fresh Air Camps.
- (7) *Dispensary List for 75 Campers*
  - Hot Water Bottles (No. 7)
  - Bed Pan
  - Enema Syringe
  - Throat and Nasal Atomizer
  - Fine Combs
  - Ear Syringe
  - Wire Brush (for hair)
  - Hypodermic Syringe
  - 10 yards of Cheese Cloth
  - 1 Flash Light



- 1 lb. Absorbent Cotton
- 5 yards Sterile Gauze
- 6 one inch rolls Adhesive Tape
- 5 doz. 1 inch Bandages, factory cotton.
- 5 doz. ½-inch Bandages, gauze
- 1 box Applicators
- 1 box Spatulas
- 6 Splints

*Antiseptics*

- 1 lb. Boracic acid
- 1 bottle bi-chloride of Mercury tablets (colored)
- 8 oz. Tincture of Iodine (3%)
- 1 large bottle Lysol (spraying beds)
- ½ lb. Powdered Linseed
- ¼ lb. Sodium Bicarbonate
- ½ lb. Keen's Mustard
- 1 tube Capsolin
- 2 oz. Vaseline
- 4. oz. Collodion
- 2 oz. Camphorated Oil

*For Sunburn*

- Ozonol—1 lb. tin

*Mosquito Bites*

- To prevent—24 oz. Oil of Sassafras

*Ants*

- Red Pepper, Gasoline, Coal Oil—applied at source

*Throat Gargle*

- 8 oz. Glyco-Thymoline or Salt Solution

*Chills*

- 4 oz. Jamaica Ginger

*To Relieve Pain*

- 100 Aspirin Tablets

*Indigestion, Faints, etc.*

- 4 oz. Aromatic Spirits of Ammonia

*Ear aches—Moist Dressings, etc.*

- 4 oz. Keith's Dressing

*Toothache*

- 1 oz. Oil of Cloves

*Poison Ivy and Skin Diseases*

- 1 pt. Calomel Lotion

*Pediculosis*

Derbac Soap—Oil of Sassafras

*Purgatives and Laxatives*

- 1 qt. Castor Oil
- 1 bottle A.B.S. & C. Tablets
- 1 lb. Epsom Salts
- 1 doz.  $\frac{1}{2}$  gr. Calomel
- 1 box Seidlitz Powders

*Instruments for Dispensary*

- 1 fine Dissecting Scissors
  - 2 Forceps—1 fine and 1 coarse
  - 1 Scalpel
  - 1 Dental Probe
  - 1 large Kidney Basin
  - 1 Round Basin.
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## The Provincial Board of Health of Ontario

Communicable Diseases reported for the Province for the Weeks  
July 5th, 12th, 19th, 26th, 1924

COMPARATIVE TABLE

Diseases	June, 1924		June, 1924	
	Cases	Deaths	Cases	Deaths
Cerebro-Spinal-Meningitis .....	2	1	5	3
Chancroid .....	....	....	1	....
Chicken-Pox .....	179	....	*....	....
Diphtheria .....	220	12	225	24
Encephalitis Lethargica .....	1	1	*....	....
Gonorrhoea .....	124	....	127	....
Influenza .....	....	2	....	7
German Measles .....	28	....	*....	....
Measles .....	1645	8	1412	11
Mumps .....	141	1	*....	....
Pneumonia .....	....	68	....	47
Scarlet Fever .....	267	3	243	4
Small-Pox .....	7	....	14	....
Syphilis .....	45	....	87	....
Tuberculosis .....	137	**60	188	108
Typhoid .....	77	4	58	8
Whooping Cough .....	109	4	208	20

\*Not reported in 1923.

\*\*Only 40% reported.

JOHN W. McCULLOUGH,  
Chief Officer of Health.

### The Water Supply of the Town of Forest

IN THE MATTER OF KING against MUNICIPAL CORPORATION of the Town of FOREST and JOSEPH PROUT and other MEMBERS of the COUNCIL of the said CORPORATION.

On Friday, 21st March, 1924, the Corporation of the Town of Forest and the individual Members of the Council, including those who resigned on the fifth (5th) day of March, 1924, appeared before me, charged with having refused or neglected to carry out the Provisions of a Report of

the Provincial Board of Health of the Province of Ontario, bearing date the 6th day of September, 1921, which Report had been made under the authority of Sec. 96 of the Public Health Act, which was an expression of an opinion of the Provincial Board of Health that it was necessary in the interests of the Public Health of the Town of Forest that the Council of the Corporation of the said Town, establish and carry out the construction of a system of Water Mains, and install Pumping Station and a series of Driven Wells to meet the requirements of the Municipality for a supply of water and that the Corporation has and had neglected to pass all By-Laws necessary for the establishment of the works reported upon, although due notice was given by the Chief Officer of Health, requiring the said Order to be carried out on or before the 5th day of March, 1924, and such neglect and refusal, being a violation of the Provisions of the Public Health Act. Crown Attorney F. W. Willson appeared on behalf of the Provincial Board of Health; Mr. W. Ross Gray appeared as representing the Corporation of the Town of Forest and Mr. A. Weir, K.C., represented the individual Members of the Corporation, including those who resigned on the 5th day of March, 1924.

Evidence was heard and an Adjournment was granted for one week to enable the Prosecution to complete their evidence and Mr. Weir, K.C., on behalf of the individual Members asked for a Dismissal of the Complaint. Judgment on this Application was reserved.

On Friday the 28th day of March, 1924, the Parties were again before the Court and further Evidence was put in by the Prosecution and after hearing same, the Information and Complaint was dismissed, so far as the individual Members were concerned, and Judgment was reserved as against the Corporation of the Town of Forest.

At the opening of the Court, Mr. W. Ross Gray, on behalf of the Corporation, submitted a Certificate, dated the 28th day of March, purporting to be made under Sec. 114 of the Public Health Act, Chap. 218, R.S.O., 1914, to the effect that "the Local Board of Health of the Municipal Corporation of the Town of Forest had passed a Resolution that the Town of Forest was unable at the present time to comply with the Provisions of the Public Health Act, in respect of the alleged Report, and alleged Order of the Provincial Board of Health for the establishment of a Water Works System for the said Corporation". In support of said Certificate Mr. W. Ross Gray argued that under Sec. 114 of the Public Health Act, the Certificate operated as a bar to all Proceedings against the Corporation for a period of six (6) months. After listening to Argument, I held that Sec. 114 did not apply to a Municipal Corporation, or to a Report made by the Provincial Board of Health

under Sec. 96, and refused the Application of Counsel for the Corporation, and proceeded with the case.

I was asked by Counsel for the Corporation to state a Case and agreed to do so, provided the Application was made in proper form. At the conclusion of Evidence for the Prosecution, arguments of Counsel were heard, and Judgment was reserved.

It would appear from the Evidence, that owing to the unsatisfactory condition of the private Wells in the Town of Forest and following on a Report, dated 1st day of September, 1921, made by the Director of the Sanitary Engineering Division of the Provincial Board of Health, the Provincial Board of Health issued a Report in writing that having inquired into, ascertained and considered the existing conditions in the Municipality of the Town of Forest, and said investigation having indicated a serious condition of the private and municipal wells for drinking water supply, and in respect of the fact that a number of ratepayers had petitioned the Board for an order under Sec. 96 of the Public Health Act, is of the opinion that it was necessary, in the interest of Public Health, that the Council of the Corporation of the Town of Forest do establish and carry out certain improvements as follows:

- (1) The construction of a System of Water Mains.
- (2) Installation of Pumping Station.
- (3) A series of Driven Wells to meet the requirements of the Municipality for a supply of Water.

Said Report was dated the 6th day of September, 1921.

Said Report terminates with the following words, "The Board herewith sends Notice to the Council of the Corporation of the Town of Forest, immediately to take the necessary steps to obtain engineering advice and to establish and carry to completion, the foregoing improvements". This Report including the Notice to the Council of the Corporation as set out above, was served on the then Mayor of the Corporation, one George Beatty, on the 9th day of September, 1921, by the Sheriff of the County.

It is admitted by the Town that nothing has been done since that time, up to the present, in the way of carrying out the instructions of the Board, and that the position in the Town of Forest, so far as the Water Works System is concerned is the same now as when the Report was issued. Numerous communications have passed between the Provincial Board and the Municipality, and a recently as February in this year a deputation which had been appointed at a Council Meeting on the 15th of February, attended on the Minister of Health with reference to said Water Works and the evidence of one of the Deputation,

Reeve Robert Hare, was to the effect that when that Deputation interviewed the Minister, the Minister informed them that the Town must follow out the order of the Board. This was confirmed by the evidence of the Secretary of the Provincial Board of Health, who was present when the Deputation waited upon the Minister. The Council, on the Report of the Deputation, as to what took place when they interviewed the Minister, voted on a Resolution "That the Council accept the Committee's Report and that we obey the Provincial Board of Health Orders, re Water Works". Three (3) Members of the Corporation voted in favour of the said Resolution and five (5) Members voted against it. Subsequently, at an adjourned Meeting of the Council, a Resolution in the following terms was carried:—"WHEREAS, after a week's careful study of the construction of Water Works System and Service in the Town of Forest at a cost of From One Hundred and Seventy-Five Thousand (\$175,000.00) to Two Hundred Thousand (\$200,000.00) Dollars, allowing a period of four (4) years and Interest at the rate of five and three quarters per cent. (5¾%) or better; AND WHEREAS the material being down only 15% from Book price; AND WHEREAS the majority of ratepayers of the Corporation deem it unwise that we proceed with the construction of Water Works and Service at the present time, it was resolved that this Council should take no Action in the matter at the present time." Subsequently on the 5th day of March, four (4) of the Members of the Council resigned and four (4) new Members were nominated and declared elected by Acclamation.

The Prosecution endeavoured to put in Evidence as to the receipt by the Municipal Corporation of a certain Telegram from the Board of Health on the 5th day of March, 1924; Counsel for the Defence contended that proof of the contents of said telegram required production of the original; the objection was allowed and the telegram was not put in. Counsel for the Prosecution then moved to amend the Information by striking out the words "On or before the 5th day of March, 1924", and said Amendment was allowed, although Counsel for the Prosecution intimated that, in the event of a Penalty being imposed, he did not wish to ask for any Penalty in respect of a date earlier than the 5th day of March, 1924—Counsel for the Prosecution argued that under Sec. 96 of the Public Health Act, the Provincial Board were justified in making the Order of 6th of September, 1921, and that it was the duty of the Municipality to do whatever was necessary to carry out said Order, passing the necessary By-Laws for that purpose; THAT Notice from the Provincial Board to the Municipality to carry out said Order under Sec. 98 had been duly given when the Provincial Board had the report



served on the Mayor of the Corporation on the 9th day of September, 1921, said Report containing the Form of Notice which has been set out in extense, above. Prosecution further argued that the Municipal Council had refused and neglected to carry out the Report of the said Board from the 9th day of September, 1921, when they were served with same, and that they were accordingly liable to a Penalty of One Hundred Dollars (\$100.00) a day from that time, but that they did not ask for any Penalty for a longer period than from the 5th day of March, 1924, the date on which they had sent some communication to the Corporation, the terms of which were not before the Court.

Counsel for the Defence argued:—

- (1) THAT the Board had no authority to make the Report of 6th September, 1921, and in support of this Contention, referred to *Clary v. the City of Ottawa*, 50 W.N., page 673.
- (2) THAT no Penalty could be imposed under Sec. 98 in respect of the fact that no notice from the Provincial Board to the Municipal Corporation to carry out the work had been given, contending that there must be a distinct and separate Notice from the Report itself, and that the communication of 5th March, 1924, had been indicated as such Notice, but owing to the fact that it was not proved or no evidence was before the Court, such Notice had not been given and therefore the Court had no jurisdiction to impose any Penalty.

In the case of *Clary v. the City of Ottawa*, Mr. Justice Lennox, in referring to the Powers of the Provincial Board of Health under Sec. 96 states that the Power being exceptional and drastic "It is obviously imperative that the conditions of its exercise must unquestionably exist and be scrupulously observed". In that case, which was an application by a ratepayer to quash a By-Law that had been passed by the Corporation of the City of Ottawa following on a Report by the Provincial Board of Health, the Court held that the By-Law was an illegal and improper one, on several grounds:—

- 1st—Because of plans, drawings and specifications had not been submitted to, and examined, weighed and passed upon by the Board before the Municipal Council passed the By-Law.
- 2nd—Because the City of Ottawa had applied to and had obtained from the Legislature of the Province of Ontario a special Act, authorizing the Construction of certain works and this By-Law was not in accordance with the said Act.
- 3rd—Because the By-Law proposed to obtain their supply of Water from a point outside the Province of Ontario and that they had not obtained, as was necessary, authorization of the works by the

Legislature of the Province of Quebec, from whence the supply of Water was to be obtained.

I cannot see that the decision in this case has any bearing on the case before the Court. Had the Municipal Council of the Corporation obeyed the Report of the Provincial Board of Health, they would have employed Engineers to draw up plans and specifications of the Works called for in the Report of the Provincial Board, had submitted said plans, drawings and specifications to the Provincial Board for their approval and receiving their approval, could have passed the necessary By-Law for carrying out and financing the work.

It was urged before me that I had jurisdiction to say whether or not the Report of the Provincial Board of the 6th of September, 1921, was a good Report or a bad Report. I cannot agree to this Contention, nor do I think that the decision in the case of *Clary v. the City of Ottawa* supports that contention. That case goes no further than to say that the Provincial Board in exercising its Powers must not depart from the procedure laid down in the Public Health Act, under which Act a By-Law could not be passed until the plans, drawings and specifications had been approved of by the Board.

From the Report of the Engineer of 1st September, 1921, there could be no doubt that the necessity for something being done in connection with the Water supply of the Town of Forest, existed. There can be no doubt in my mind that the Provisions of Sec. 96 were intended to provide a means whereby the Provincial Board of Health could compel a Municipality to carry out necessary works in cases where they were reluctant or dis-inclined to do so voluntarily.

I am of opinion, therefore, that the Provincial Board of Health was within its Rights and was, in fact, carrying out its duties when it issued the Report of the 6th of September, 1921. The only other points for consideration are therefore:—

- 1st—Was Notice given to the Municipality as set out in Sec. 98.
- 2nd—Have the Municipal Corporation done anything to carry out what was called for in the Report.

On the latter of these two questions, there could be no doubt as the Municipal Council admitted that they have done nothing to start even the preliminary steps necessary to install the Water Works System, in fact, as recently as the 29th day of February, 1924, they passed a Resolution as shown in the Minutes of the Meeting of that date, refusing to do anything. Immediately following the passing of said Resolution, Four (4) Members of the Council resigned and the new Members elected have

not, as yet, taken their Declaration of office, and the Corporation has not functioned.

With regard to the first point, I can see nothing in the Act itself, instructing the issue of any separate Notice. Sec. 98 lays down "That any Municipal Corporation or Body or Person refusing or neglecting to carry out the Provisions of either of the two (2) next preceding Sections, after Notice from the Provincial Board, so to do, shal' incur a Penalty of One Hundred Dollars (\$100.00) for every day upon which such default continues". I cannot see that this Section imposes on the Provincial Board the necessity of giving a separate Notice from the Report, all that is required is Notice to the Municipality to take the necessary steps. This Notice was given in this Case at the foot of the Report, being the last Paragraph thereof, and it is in most definite terms, and was served on the Mayor of the Corporation; and for this reason I hold that the Municipality has received the Notice from the Provincial Board required under Sec. 98, and that it is in default since the receipt of said Notice.

In respect of the fact, however, that the Board are not asking for a Penalty for a time prior to the 5th of March, 1924, I am not imposing any Penalty in respect of any default prior to that time. The information was served on the Corporation on the 19th day of March and from that time the matter was before the Court for its decision and any delay that has taken place since then, the Municipal Corporation has not been responsible for, and I accordingly impose a Penalty of Fourteen Hundred Dollars (\$1400.00) being at the rate of One Hundred Dollars (\$100.00) a day from the 5th day of March, 1924, until the 19th day of March, 1924, together with costs of \$25.40.

DATED AT SARNIA this second day of April A.D. 1924.

C. S. WOODROW,

P. M. County of Lambton.

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## Book Reviews

*"Blood Pressure", Cause, Effect and Remedy.* By Lewellys F. Barker, M.D., LL.D., Professor Emeritus of Medicine in Johns Hopkins University and Norman B. Cole, M.D., Assistant in Clinical Medicine in Johns Hopkins University. Published by Frederick D. Goodchild, 266 King St. West, Toronto. Price, cloth bound, \$1.50.

In reviewing this book one can not do better than quote the preface written by the authors.

"This volume goes thoroughly, but without technicalities, into a subject that is of growing concern to both doctor and patient. The doctor is concerned because he sees more and more clearly the relation of abnormal blood pressure to heredity; to acute infectious diseases; to arteriosclerosis; to diseases of the kidney; and finally to old age and the maladies, so often fatal, incident to it. The non-medical man is concerned because he is learning that the development of high blood pressure is a process rather than a disease; that symptoms develop rather late in its course; and that preventive measures must, therefore, be taken early.

"Blood Pressure" gives the non-medical man in plain, readable English, the information he would like to have."

This is a short readable book dealing with phases of blood pressure in plain, readable English, that the public would like to have on the universally discussed and much misunderstood subject of blood pressure and its relation to health and long life.

*"Hospital Organization and Operation."* By Frank E. Chapman, Director, Mount Sinai Hospital of Cleveland. Published by The Macmillan Company.

Mr. Chapman has made a decided contribution to our sparse literature on Hospital Administration. Journals specializing on Hospital administration have presented, in varied form, most of the material in this book. To the man or woman contemplating hospital administration as a vocation, this book will prove of great value. For the recognized hospital administrator it has correlated in one volume many of the modern views of this problem.

Of especial value are the chapters dealing with the business side of hospital administration and the necessity of using the information that is compiled.

A.K.H.

## Editorial

### EVERYBODY'S RESPONSIBILITY

In the discussions which have resulted from the attitude of the Dominion Government towards the venereal disease grant to the provinces some mention has been made of immigration and the suggestion has been made that immigration by the cradle of native Canadians is perhaps as important as adult immigration from foreign countries. Surely, it has been said, it is only logical that the Dominion and the provinces alike should share in the responsibility for seeing that native born Canadians are free from disease and unhandicapped by the disadvantage of diseased forebears. This argument is sound to say the least. All Canadians who believe that we should have good health conserving machinery should support the apportionment of responsibility as between the Dominion, the provinces and municipalities which will make for the highest degree of efficiency and the most rapid public health progress. It is very doubtful whether the arguments which have been brought forward as opposed to Dominion participation have been actuated by this point of view.

Another phase of the question, however, has not been discussed. The Dominion Government undertakes to encourage immigration to Canada and to some degree approves the type of immigrant admitted. Under present conditions all immigrants are not desirable from a social point of view and some are diseased. For these and other reasons many are destined to become a burden to the tax-payers.

In a large venereal disease clinic in Toronto supported up to date by joint contributions by both the Dominion government and the provinces, and obtaining municipal support as well, a survey was recently made of the patients admitted during the year 1923. It was found that out of 661 new patients, 270 were Canadian born and 391 born in other countries. Some of the foreign born were infected in Canada. Figures are not yet available on that score but it makes little difference to the argument. The Dominion government undertook to admit these people to Canada and they have become dependent to some degree upon the bounty of the Province of Ontario. Now the Dominion government by cutting the venereal disease grants to the provinces proposes to avoid or rather evade responsibility. The case cited above is only an example. The same condition of affairs applies in other provinces.

Furthermore the principle which should be stressed in the venereal disease field should be of equal force in the general field of health.

The matter of health promotion and disease prevention in the Dominion of Canada is a responsibility in which all the people must share and in which the Dominion and the provinces must do their fair part. THE PUBLIC HEALTH JOURNAL believes that this point of view is one which should be given wide publicity and that it should be pressed not only by every health officer but by every interested organization and citizen in the Dominion. This Journal will continue to fight for the creation of public opinion to the end that there be no let up in aggressive work on the part of municipality, province and Dominion alike and to this end invites the co-operation of the public.

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Social Hygiene, as it will be here understood, may be said to be a development, and even a transformation, of what was formerly known as Social Reform. In that transformation it has undergone two fundamental changes. In the first place, it is no longer merely an attempt to deal with the conditions under which life is lived, seeking to treat bad conditions as they occur, without going to their source, but it aims at prevention. It ceases to be simply a reforming of forms, and approaches in a comprehensive manner not only the conditions of life, but life itself. In the second place, its method is no longer haphazard, but organized and systematic, being based on a growing knowledge of these biological sciences which were scarcely in their infancy when the era of social reform began. Thus social hygiene is at once more radical and more scientific than the old conception of social reform. It is the inevitable method by which at a certain stage civilization is compelled to continue its own course, and to preserve, perhaps to elevate, the race.—“The Task of Social Hygiene” by Havelock Ellis.

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